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PTO/SB/05 (03-01)
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| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | 8283D |
| | First Inventor | David William Cabell, et al. |
| | Assignee | The Procter & Gamble Company |
| | Title | Fibrous Structure Having Increased Surface Area And Process For Making Same |
| | Express Mail Label No. | EU812001257US |
| APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents. | | Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 |
| <div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification Total Pages [63] (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive Title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC §113) Total Sheets [27]</div> <div>4. Oath or Declaration Total pages [2]<ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 complete)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b).</div> <div>5. <input type="checkbox"/> Application Data Sheet. See 37 CFR §1.76</div> <div>6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div> <div>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> Paperc. <input type="checkbox"/> Statement verifying identity of above copies</div> | | |
| ACCOMPANYING APPLICATION PARTS | | |
| 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | |
| 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) | | |
| 10. <input type="checkbox"/> English Translation Document (if applicable) | | |
| 11. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations | | |
| 12. <input type="checkbox"/> Preliminary Amendment | | |
| 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | |
| 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) | | |
| 15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | | |
| 16. <input type="checkbox"/> Other: | | |
| 17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>09/695,117</u> Prior application information: Examiner: <u>Jose A. Fortuna</u> Group/Art Unit: <u>1731</u> For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | |
| 19. CORRESPONDENCE ADDRESS | | |
| <input checked="" type="checkbox"/> Customer Number (Insert Customer No. here) 27752 | | |

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|--------------------------|---|--|---------|
| Name (Print/Type) | David M. Weirich | Registration No. (Attorney/Agent) | 38,361 |
| Signature |  | Date | 7/10/03 |

+ Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
(Revised for P&G use 4/7/2003)



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| FEE TRANSMITTAL for FY 2003 Patent fees are subject to annual revision. | Complete if Known | |
| | Application Number | |
| | Confirmation Number | |
| | Filing Date | |
| | First Named Inventor | David William Cabell, et al. |
| | Examiner Name | |
| | Group/Art Unit | |
| TOTAL AMOUNT OF PAYMENT (\$) 750.00 | Attorney Docket No. | 8283D |

| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17 | | 3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Code</th> <th>(\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>Surcharge-late filing fee or oath</td><td><input type="checkbox"/></td></tr> <tr><td>1052</td><td>50</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr> <tr><td>1053</td><td>130</td><td>Non-English specification</td><td><input type="checkbox"/></td></tr> <tr><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td><input type="checkbox"/></td></tr> <tr><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>1251</td><td>110</td><td>Extension for reply within 1st month</td><td><input type="checkbox"/></td></tr> <tr><td>1252</td><td>410</td><td>Extension for reply within 2nd month</td><td><input type="checkbox"/></td></tr> <tr><td>1253</td><td>930</td><td>Extension for reply within 3rd month</td><td><input type="checkbox"/></td></tr> <tr><td>1254</td><td>1,450</td><td>Extension for reply within 4th month</td><td><input type="checkbox"/></td></tr> <tr><td>1255</td><td>1,970</td><td>Extension for reply within 5th month</td><td><input type="checkbox"/></td></tr> <tr><td>1401</td><td>320</td><td>Notice of Appeal</td><td><input type="checkbox"/></td></tr> <tr><td>1402</td><td>320</td><td>Filing a brief in support of an appeal</td><td><input type="checkbox"/></td></tr> <tr><td>1403</td><td>280</td><td>Request for oral hearing</td><td><input type="checkbox"/></td></tr> <tr><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td><input type="checkbox"/></td></tr> <tr><td>1452</td><td>110</td><td>Petition to revive - unavoidable</td><td><input type="checkbox"/></td></tr> <tr><td>1453</td><td>1,300</td><td>Petition to revive - unintentional</td><td><input type="checkbox"/></td></tr> <tr><td>1501</td><td>1,300</td><td>Utility issue fee (or reissue)</td><td><input type="checkbox"/></td></tr> <tr><td>1502</td><td>470</td><td>Design issue fee</td><td><input type="checkbox"/></td></tr> <tr><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr> <tr><td>1807</td><td>50</td><td>Petitions related to provisional applications (37 C.F.R. 1.17(q))</td><td><input type="checkbox"/></td></tr> <tr><td>1806</td><td>180</td><td>Submission of Information Disclosure Statement</td><td><input type="checkbox"/></td></tr> <tr><td>1809</td><td>750</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td><input type="checkbox"/></td></tr> <tr><td>1810</td><td>750</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td><input type="checkbox"/></td></tr> <tr><td>1801</td><td>750</td><td>Request for Continued Examination (RCE)</td><td><input type="checkbox"/></td></tr> <tr><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td><input type="checkbox"/></td></tr> <tr><td>1454</td><td>1300</td><td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td><td><input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td><input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td><input type="checkbox"/></td></tr> </tbody> </table> | | Code | (\$) | Fee Description | Fee Paid | 1051 | 130 | Surcharge-late filing fee or oath | <input type="checkbox"/> | 1052 | 50 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> | 1053 | 130 | Non-English specification | <input type="checkbox"/> | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | <input type="checkbox"/> | 1804 | 920* | Requesting publication of SIR prior to Examiner's action | <input type="checkbox"/> | 1805 | 1,840* | Requesting publication of SIR after Examiner's action | <input type="checkbox"/> | 1251 | 110 | Extension for reply within 1 st month | <input type="checkbox"/> | 1252 | 410 | Extension for reply within 2 nd month | <input type="checkbox"/> | 1253 | 930 | Extension for reply within 3 rd month | <input type="checkbox"/> | 1254 | 1,450 | Extension for reply within 4 th month | <input type="checkbox"/> | 1255 | 1,970 | Extension for reply within 5 th month | <input type="checkbox"/> | 1401 | 320 | Notice of Appeal | <input type="checkbox"/> | 1402 | 320 | Filing a brief in support of an appeal | <input type="checkbox"/> | 1403 | 280 | Request for oral hearing | <input type="checkbox"/> | 1451 | 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> | 1452 | 110 | Petition to revive - unavoidable | <input type="checkbox"/> | 1453 | 1,300 | Petition to revive - unintentional | <input type="checkbox"/> | 1501 | 1,300 | Utility issue fee (or reissue) | <input type="checkbox"/> | 1502 | 470 | Design issue fee | <input type="checkbox"/> | 1460 | 130 | Petitions to the Commissioner | <input type="checkbox"/> | 1807 | 50 | Petitions related to provisional applications (37 C.F.R. 1.17(q)) | <input type="checkbox"/> | 1806 | 180 | Submission of Information Disclosure Statement | <input type="checkbox"/> | 1809 | 750 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> | 1810 | 750 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> | 1801 | 750 | Request for Continued Examination (RCE) | <input type="checkbox"/> | 1802 | 900 | Request for expedited examination of a design application | <input type="checkbox"/> | 1454 | 1300 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> | Other fee (specify) _____ | | | <input type="checkbox"/> | Other fee (specify) _____ | | | <input type="checkbox"/> |
| Code | (\$) | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1051 | 130 | Surcharge-late filing fee or oath | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1052 | 50 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1053 | 130 | Non-English specification | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1804 | 920* | Requesting publication of SIR prior to Examiner's action | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1805 | 1,840* | Requesting publication of SIR after Examiner's action | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1251 | 110 | Extension for reply within 1 st month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1252 | 410 | Extension for reply within 2 nd month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1253 | 930 | Extension for reply within 3 rd month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1254 | 1,450 | Extension for reply within 4 th month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1255 | 1,970 | Extension for reply within 5 th month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1401 | 320 | Notice of Appeal | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1402 | 320 | Filing a brief in support of an appeal | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1403 | 280 | Request for oral hearing | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1451 | 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1452 | 110 | Petition to revive - unavoidable | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1453 | 1,300 | Petition to revive - unintentional | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1501 | 1,300 | Utility issue fee (or reissue) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1502 | 470 | Design issue fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1460 | 130 | Petitions to the Commissioner | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1807 | 50 | Petitions related to provisional applications (37 C.F.R. 1.17(q)) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1806 | 180 | Submission of Information Disclosure Statement | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1809 | 750 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1810 | 750 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1801 | 750 | Request for Continued Examination (RCE) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1802 | 900 | Request for expedited examination of a design application | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1454 | 1300 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ | | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ | | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION 1. BASIC FILING FEE – Large Entity <table border="1"> <thead> <tr> <th>Code</th> <th>(\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>Utility filing fee</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>1002</td><td>330</td><td>Design filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>1004</td><td>750</td><td>Reissue filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>1005</td><td>160</td><td>Provisional filing fee</td><td><input type="checkbox"/></td></tr> <tr><td colspan="2">SUBTOTAL (1)</td><td></td><td>(\$)[750.00]</td></tr> </tbody> </table> | | Code | (\$) | Fee Description | Fee Paid | 1001 | 750 | Utility filing fee | <input checked="" type="checkbox"/> | 1002 | 330 | Design filing fee | <input type="checkbox"/> | 1004 | 750 | Reissue filing fee | <input type="checkbox"/> | 1005 | 160 | Provisional filing fee | <input type="checkbox"/> | SUBTOTAL (1) | | | (\$)[750.00] | 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE – Large Entity <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>[20] - 20** = [0] x</td> <td>[18] =</td> <td>[0]</td> </tr> <tr> <td>Independent Claims</td> <td>[2] - 3** = [0] x</td> <td>[84] =</td> <td>[0]</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>[] =</td> <td>[]</td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <table border="1"> <thead> <tr> <th>Code</th> <th>(\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>**Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>**Reissue claims in excess of 20 & over original patent</td></tr> <tr><td colspan="2">SUBTOTAL (2)</td><td>(\$)[0.00]</td></tr> </tbody> </table> | | | Extra Claims | Fee from Below | Fee Paid | Total Claims | [20] - 20** = [0] x | [18] = | [0] | Independent Claims | [2] - 3** = [0] x | [84] = | [0] | Multiple Dependent | | [] = | [] | Code | (\$) | Fee Description | 1202 | 18 | Claims in excess of 20 | 1201 | 84 | Independent claims in excess of 3 | 1203 | 280 | Multiple dependent claim, if not paid | 1204 | 84 | **Reissue independent claims over original patent | 1205 | 18 | **Reissue claims in excess of 20 & over original patent | SUBTOTAL (2) | | (\$)[0.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Code | (\$) | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1001 | 750 | Utility filing fee | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1002 | 330 | Design filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1004 | 750 | Reissue filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1005 | 160 | Provisional filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | | | (\$)[750.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Extra Claims | Fee from Below | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | [20] - 20** = [0] x | [18] = | [0] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | [2] - 3** = [0] x | [84] = | [0] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent | | [] = | [] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Code | (\$) | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1202 | 18 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1201 | 84 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1203 | 280 | Multiple dependent claim, if not paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1204 | 84 | **Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1205 | 18 | **Reissue claims in excess of 20 & over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | (\$)[0.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (3) (\$)[] | | * Reduced by Basic Filing Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|---------------------|------------------|---------------------------------|----------------|
| SUBMITTED BY | | Complete (if applicable) | |
| Name (Print/Type) | David M. Weirich | Registration No. | 38,361 |
| Signature | | Telephone | (513) 634-6961 |
| | | Date | 7/10/03 |

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VA 22313-1450.

~~Printed Name~~ TERESA A. WORT
Name
Teresa A. Wort
Signature

Case 8283D

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of :

David William Cabell, et al. :

Filed: July 10, 2003 :

For: Fibrous Structure Having Increased Surface Area And Process For Making Same

TRANSMITTAL OF FORMAL DRAWINGS AND
PETITION TO ACCEPT PHOTOMICROGRAPHS PURSUANT TO 37 CFR 1.84(b)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

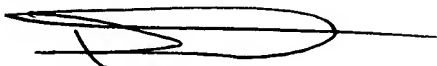
Dear Sir:

Enclosed herewith are the formal drawings (3 copies of 27 sheets) for the above-identified patent application. These formal drawings include (3) sets of photomicrographs representing Figures 32-41 and 45-46. Applicants hereby petition under 37 CFR 1.84(b) that these photomicrographs be accepted as formal drawings, as this aspect of the invention is incapable of being accurately or adequately depicted by India ink drawings.

Please charge payment of the \$130.00 petition fee under 37 CFR 1.17(h) to Deposit Account No. 16-2480. Please also charge any additional fees that may be required to this deposit account number. A duplicate copy of this letter has been included herewith for this purpose.

Respectfully submitted,
For: David William Cabell et al.

By



David M. Weirich
Attorney for Applicant(s)
Registration No. 38,361
Tele. No.: (513) 634-6961

July 10, 2003
Customer #27752